

**ILLINOIS COMMERCE COMMISSION  
TRANSPORTATION DIVISION / RAIL SAFETY SECTION**

**RECEIVED**

**PROJECT STATUS REPORT**

NOV 1 2006

**TYPE: (CHECK ONE)**

PROGRESS	<input type="checkbox"/>
COMPLETION <sup>1</sup>	<input checked="" type="checkbox"/>

Illinois Commerce Commission  
RAIL SAFETY SECTION

DATE	10/31/06
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**PROJECT INFORMATION:**

Reporting Party:	Indiana Rail Road Company
Docket/Order #:	1153 706-0021
Ordered Completion Date:	
Status Reports Due:	
Completion Report Due <sup>1</sup> :	
AAR/DOT#, Milepost:	292 467E, mp139.35; 292 465R, mp 139.54, 292 464J, mp 139.55, and 292 463C, mp 139.60
Street, (in/near) City, County:	Taylor, Garfield, Range, and Adams in Oblong, IL
Railroad Company:	Indiana Rail Road Company

<sup>1</sup> Railroad Companies must include an updated USDOT Inventory Form with their Completion Report.

**PROJECT MANAGER INFORMATION<sup>2</sup>:**

Name:	Mr. John R. Cummings, Jr.
Title:	Manager Communications and Signals
Representing:	Indiana Rail Road Company
Street Address:	81 South Charlotte Avenue P.O. Box 145
City, State, Zip:	Switz City, IN 47465
Office Phone:	<del>812-659-9123</del> ext 3465 317-616-3465
Office Fax:	812-659-9122
Cellular Phone:	
E-Mail Address:	john.cummings@inrd.com

<sup>2</sup>Project Manager information to be submitted by Village and the Indiana Rail Road Company

**DESCRIPTION OF IMPROVEMENTS ORDERED:**

- Taylor Street - Installation of automatic flashing light signals and gates with a bell, controlled by constant warning time circuitry, and equipped with an event recorder.
- Installation of temporary STOP signs at the subject crossing within 30 days of receipt of a Commission Order for the installation of new automatic warning devices.
- Garfield, Range, and Adams - Add gates to existing automatic flashing light signals.
- Add Railroad Crossing Pavement Markings on each side of tracks at Adams and Range.

**STATUS OF WORK:** (use additional blank sheet, if necessary)

*Taylor Street: Automatic flashing light signals and gates with a bell controlled by constant warning time circuitry, and equipped with an event recorder have been installed.*

*Garfield, Range, and Adams: Gates have been added to existing signals.*

# U.S. DOT CROSSING INVENTORY FORM

DEPARTMENT OF TRANSPORTATION  
FEDERAL RAILROAD ADMINISTRATION (FRA)

OMB Control No. 2130-0017  
Expires: 7/31/2006

A. Initiating Agency <input checked="" type="checkbox"/> Railroad <input type="checkbox"/> State		B. Crossing Number (max. 7 char.) <u>292463 C</u>		C. Reason for Update <input checked="" type="checkbox"/> Changes in Existing Data <input type="checkbox"/> New Crossing <input type="checkbox"/> Closed Crossing or Abandoned		D. Effective Date (MM/DD/YYYY) <u>10/31/06</u>	
<b>Part I: Location and Classification Information</b>							
1. Railroad Oper. Co. (code (max. 4 char.) or name) <u>ZNRD</u>				2. State (2 char.) <u>IL</u>		3. County (max. 20 char.) <u>Crawford</u>	
4. Railroad Division or Region (max. 14 char.)		5. Railroad Subdivision or District (max. 14 char.) <u>Indianapolis</u>		6. Branch or Line Name (max. 15 char.) <u>Main Track</u>		7. RR Milepost (max. 7 char.) (nnnnn.nn) <u>139.60</u>	
8. RR I.D. No. (max. 10 char.) <u>X-139.60</u>		9. Nearest RR Timetable Station (max. 15 char.) (optional) <u>Oblong</u>		10. Parent RR (max. 4 char.) (if applicable)		11. Crossing Owner (RR or Company name) (if applicable)	
12. City (max. 16 char.) (check one) <input checked="" type="checkbox"/> In <input type="checkbox"/> Near <u>Oblong</u>				13. Street or Road Name (max. 17 char.) <u>Adams St.</u>			
14. Highway Type & No. (max. 7 char.) <u>City St.</u>				15. ENS Sign Installed (1-800) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
16. Quiet Zone <input checked="" type="checkbox"/> No <input type="checkbox"/> 24 hr <input type="checkbox"/> Partial <input type="checkbox"/> Unknown				STATE SUPPLIED INFORMATION			
17. Crossing Type (choose one only) <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Pedestrian				21. HSR Corridor ID (2 char.)			
18. Crossing Position <input checked="" type="checkbox"/> At Grade <input type="checkbox"/> RR Under <input type="checkbox"/> RR Over				22. County Map Ref. No. (max. 10 char.)			
19. Type of Passenger Service <input type="checkbox"/> AMTRAK <input type="checkbox"/> AMTRAK & Other <input type="checkbox"/> Other <input checked="" type="checkbox"/> None				23. Latitude (max. 10 char., nn.nnnnnnn)			
20. Average Passenger Train Count Per Day <u>0</u>				24. Longitude (max. 11 char., nnn.nnnnnnn)			
				25. Lat/Long Source <input type="checkbox"/> Actual <input type="checkbox"/> Estimated			
26. Is There an Adjacent Crossing With a Separate Number? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Provide Number _____ (7 characters)							
27. PRIVATE CROSSING INFORMATION							
27.A. Category (check one) <input type="checkbox"/> Farm <input type="checkbox"/> Residential <input type="checkbox"/> Recreational <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial		27.B. Public Access <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		27.C. Signs/Signals <input type="checkbox"/> None <input type="checkbox"/> Signs Specify (max. 15 char.) _____ <input type="checkbox"/> Signals Specify (max. 15 char.) _____			
28.A. Railroad Use (max. 20 char.)				29.A. State Use (max. 20 char.)			
28.B. Railroad Use (max. 20 char.)				29.B. State Use (max. 20 char.)			
28.C. Railroad Use (max. 20 char.)				29.C. State Use (max. 20 char.)			
28.D. Railroad Use (max. 20 char.)				29.D. State Use (max. 20 char.)			
30. Narrative (max. 100 char.)							
31. Emergency Contact (Telephone No.) <u>1-800-677-1985</u>		32. Railroad Contact (Telephone No.) <u>1-317-616-3479</u>		33. State Contact (Telephone No.)			
<b>MUST COMPLETE REMAINDER OF FORM FOR PUBLIC VEHICLE CROSSINGS AT GRADE</b>							
<b>Part II: Railroad Information</b>							
1. Number of Daily Train Movements							
1.A. Total Trains <u>8</u>		1.B. Total Switching Trains <u>4</u>		1.C. Total Daylight Thru Trains (6 AM to 6 PM) <u>4</u>		1.D. Check if Less Than One Movement Per Day <input type="checkbox"/>	
2. Speed of Train at Crossing							
2.A. Maximum Time Table Speed (mph) <u>35</u>							
2.B. Typical Speed Range Over Crossing (mph) from <u>25</u> to <u>35</u>							
3. Type and Number of Tracks Main <u>1</u> Other <u>0</u> If Other, Specify (max. 10 char.) _____							
4. Does Another RR Operate a Separate Track at Crossing? <input type="checkbox"/> Yes If Yes, Specify RR (max. 16 char.) _____ <input checked="" type="checkbox"/> No				5. Does Another RR Operate Over Your Track at Crossing? <input type="checkbox"/> Yes If Yes, Specify RR (max. 16 char.) _____ <input checked="" type="checkbox"/> No			

T06-0021

X-12492

DOCKETED

# U.S. DOT CROSSING INVENTORY FORM

B. Crossing Number (max. 7 char.) <b>292 463 C</b>		PAGE 2		D. Effective Date (MM/DD/YYYY) <b>10/31/96</b>	
<b>Part III: Traffic Control Device Information</b>					
1. No Signs or Signals  <input type="checkbox"/> Check if Correct		2. Type of Warning Device at Crossing - Signs (specify number of each) <div style="display: flex; justify-content: space-between;"> <div style="width: 20%;">2.A. Crossbucks: <b>2</b></div> <div style="width: 20%;">2.B. Highway Stop Signs (R1-1) <b>0</b></div> <div style="width: 20%;">2.C. RR Advance Warning Signs (W10-1) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div> <div style="width: 20%;">2.D. Hump Crossing Sign (W10-5) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown</div> </div>			
2.E. Pavement Markings  <input type="checkbox"/> Stoplines <input type="checkbox"/> RR Xing Symbols <input checked="" type="checkbox"/> None		2.F. Other Signs: (specify MUTCD type) Number <b>0</b> Specify Type (max. 10 char.) _____ Number <b>0</b> Specify Type (max. 10 char.) _____			
3. Type of Warning Device at Crossing - Train Activated Devices (specify number of each)					
3.A. Gates  <b>2</b>	3.B. Four-quadrant (or full barrier) Gates  <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	3.C. Cantilevered (or Bridged) Flashing Lights: Over Traffic Lane (number) <b>0</b> Not Over Traffic Lane (number) <b>0</b>		3.D. Mast Mounted Flashing Lights (number)  <b>2</b>	3.E. Number of Flashing Light Pairs  <b>5</b>
3.F. Other Flashing Lights: Number <b>0</b> Specify Type (max. 9 char.) _____		3.G. Highway Traffic Signals (number) <b>0</b>	3.H. Wigwags (number) <b>0</b>	3.I. Bells (number) <b>1</b>	
3.K. Other Train Activated Warning Devices: (specify) (max. 9 char.) _____					
4. Specify Special Warning Device NOT Train Activated (max. 20 char.) _____			5. Channelization Devices With Gates <input type="checkbox"/> All Approaches <input type="checkbox"/> One Approach <input checked="" type="checkbox"/> None		
6. Train Detection <input checked="" type="checkbox"/> Constant Warning Time <input type="checkbox"/> DC/AFO <input type="checkbox"/> Motion Detectors <input type="checkbox"/> Other <input type="checkbox"/> None		7. Signalling for Train Operation: Is Track Equipped with Train Signals? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		8. Traffic Light Interconnection/Preemption <input type="checkbox"/> Not Interconnected <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Simultaneous Preemption <input type="checkbox"/> Advance Preemption	
9. Reserved For Future Use		10. Reserved For Future Use		11. Reserved For Future Use	
<b>Part IV: Physical Characteristics</b>					
1. Type of Development <input type="checkbox"/> Open Space <input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional			2. Smallest Crossing Angle <input type="checkbox"/> 0° - 29° <input type="checkbox"/> 30° - 59° <input checked="" type="checkbox"/> 60° - 90°		
3. Number of Traffic Lanes Crossing Railroad  <b>2</b>		4. Are Truck Pullout Lanes Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		5. Is Highway Paved? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
6. Crossing Surface (on main line) <div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"><input checked="" type="checkbox"/> 1. Timber</div> <div style="width: 33%;"><input type="checkbox"/> 2. Asphalt</div> <div style="width: 33%;"><input type="checkbox"/> 3. Asphalt and Flange</div> <div style="width: 33%;"><input type="checkbox"/> 4. Concrete</div> <div style="width: 33%;"><input type="checkbox"/> 5. Concrete and Rubber</div> <div style="width: 33%;"><input type="checkbox"/> 6. Rubber</div> <div style="width: 33%;"><input type="checkbox"/> 7. Metal</div> <div style="width: 33%;"><input type="checkbox"/> 8. Unconsolidated</div> <div style="width: 33%;"><input type="checkbox"/> 9. Other (Specify) _____</div> </div>					
7. Does Track Run Down a Street? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		8. Nearby Intersecting Highway? <input checked="" type="checkbox"/> Less than 75 feet <input type="checkbox"/> 75 to 200 feet <input type="checkbox"/> 200 to 500 feet <input type="checkbox"/> N/A Is it Signalized? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
9. Is Crossing Illuminated? (street lights within approx. 50 feet from nearest rail) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		10. Is Commercial Power Available? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		11. Space Reserved For Future Use	
<b>Part V: Highway Information</b>					
1. Highway System <input type="checkbox"/> Interstate <input type="checkbox"/> Federal Aid, Not NHS <input type="checkbox"/> Nat. Hwy System (NHS) <input checked="" type="checkbox"/> Non Federal Aid		2. Is Crossing on State Highway System? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		3. Functional Classification of Road at Crossing <b>Rural Local</b>	
4. Posted Highway Speed  <b>30</b>					
5. Annual Average Daily Traffic (AADT) Year <b>2005</b> AADT <b>700</b>		6. Estimate Percent Trucks <b>8</b>		7. Average Number of School Buses Over Crossing per School Day <b>0</b>	

Paperwork Reduction Act: Public reporting for this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB Control Number. The valid OMB Control Number for this collection is 2130-0017.

# U.S. DOT CROSSING INVENTORY FORM

DEPARTMENT OF TRANSPORTATION  
FEDERAL RAILROAD ADMINISTRATION (FRA)

OMB Control No. 2130-0017  
Expires: 7/31/2006

<b>A. Initiating Agency</b> <input checked="" type="checkbox"/> Railroad <input type="checkbox"/> State	<b>B. Crossing Number (max. 7 char.)</b> 292464J	<b>C. Reason for Update</b> <input checked="" type="checkbox"/> Changes in Existing Data <input type="checkbox"/> New Crossing <input type="checkbox"/> Closed Crossing or Abandoned	<b>D. Effective Date (MM/DD/YYYY)</b> 10/31/06
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## Part I: Location and Classification Information

1. Railroad Oper. Co. (code (max. 4 char.) or name) INRD		2. State (2 char.) ZL	3. County (max. 20 char.) Crawford
4. Railroad Division or Region (max. 14 char.)	5. Railroad Subdivision or District (max. 14 char.) Indianapolis	6. Branch or Line Name (max. 15 char.) Main Track	7. RR Milepost (max. 7 char.) (nnnn.nn) 139.55
8. RR I.D. No. (max. 10 char.) X-139.55	9. Nearest RR Timetable Station (max. 15 char.) (optional) Oblong	10. Parent RR (max. 4 char.) (if applicable)	11. Crossing Owner (RR or Company name) (if applicable)
12. City (max. 16 char.) (check one) <input checked="" type="checkbox"/> In <input type="checkbox"/> Near Oblong		13. Street or Road Name (max. 17 char.) S. Range St.	<b>STATE SUPPLIED INFORMATION</b> 21. HSR Corridor ID (2 char.)
14. Highway Type & No. (max. 7 char.) City St.	15. ENS Sign Installed (1-800) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	16. Quiet Zone <input checked="" type="checkbox"/> No <input type="checkbox"/> 24 hr <input type="checkbox"/> Partial <input type="checkbox"/> Unknown	22. County Map Ref. No. (max. 10 char.)
17. Crossing Type (choose one only) <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Pedestrian	18. Crossing Position <input checked="" type="checkbox"/> At Grade <input type="checkbox"/> RR Under <input type="checkbox"/> RR Over	19. Type of Passenger Service <input type="checkbox"/> AMTRAK <input type="checkbox"/> AMTRAK & Other <input type="checkbox"/> Other <input checked="" type="checkbox"/> None	20. Average Passenger Train Count Per Day 0
26. Is There an Adjacent Crossing With a Separate Number? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    If Yes, Provide Number _____ (7 characters)		23. Latitude (max. 10 char., nn.nnnnnn)	
24. Longitude (max. 11 char., nnn.nnnnnn)		25. Lat/Long Source <input type="checkbox"/> Actual <input type="checkbox"/> Estimated	

27. PRIVATE CROSSING INFORMATION		
27.A. Category (check one) <input type="checkbox"/> Recreational <input type="checkbox"/> Farm <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial	27.B. Public Access <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	27.C. Signs/Signals <input type="checkbox"/> None <input type="checkbox"/> Signs <input type="checkbox"/> Signals    Specify (max. 15 char.) _____

28.A. Railroad Use (max. 20 char.)	29.A. State Use (max. 20 char.)
28.B. Railroad Use (max. 20 char.)	29.B. State Use (max. 20 char.)
28.C. Railroad Use (max. 20 char.)	29.C. State Use (max. 20 char.)
28.D. Railroad Use (max. 20 char.)	29.D. State Use (max. 20 char.)

30. Narrative (max. 100 char.)		
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31. Emergency Contact (Telephone No.) 1-800-677-1985	32. Railroad Contact (Telephone No.) 1-317-616-3479	33. State Contact (Telephone No.)
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## MUST COMPLETE REMAINDER OF FORM FOR PUBLIC VEHICLE CROSSINGS AT GRADE

### Part II: Railroad Information

1. Number of Daily Train Movements			
1.A. Total Trains 8	1.B. Total Switching Trains 4	1.C. Total Daylight Thru Trains (6 AM to 6 PM) 4	1.D. Check if Less Than One Movement Per Day <input type="checkbox"/>
2. Speed of Train at Crossing			
2.A. Maximum Time Table Speed (mph) 35			
2.B. Typical Speed Range Over Crossing (mph) from 25 to 35			
3. Type and Number of Tracks			
Main 1 Other 0 If Other, Specify (max. 10 char.)			
4. Does Another RR Operate a Separate Track at Crossing? <input type="checkbox"/> Yes If Yes, Specify RR (max. 16 char.) <input checked="" type="checkbox"/> No		5. Does Another RR Operate Over Your Track at Crossing? <input type="checkbox"/> Yes If Yes, Specify RR (max. 16 char.) <input checked="" type="checkbox"/> No	

706-0021  
X-12491

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# U.S. DOT CROSSING INVENTORY FORM

B. Crossing Number (max. 7 char.) <b>292464J</b>		PAGE 2		D. Effective Date (MM/DD/YYYY) <b>10/31/06</b>	
<b>Part III: Traffic Control Device Information</b>					
1. No Signs or Signals  <input type="checkbox"/> Check if Correct		2. Type of Warning Device at Crossing - Signs (specify number of each)			
		2.A. Crossbucks: <b>4</b>	2.B. Highway Stop Signs (R1-1) <b>0</b>	2.C. RR Advance Warning Signs (W10-1) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	2.D. Hump Crossing Sign (W10-5) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown
2.E. Pavement Markings  <input type="checkbox"/> Stoplines <input type="checkbox"/> RR Xing Symbols <input checked="" type="checkbox"/> None		2.F. Other Signs: (specify MUTCD type) Number <b>0</b> Specify Type (max. 10 char.) _____ Number <b>0</b> Specify Type (max. 10 char.) _____			
3. Type of Warning Device at Crossing - Train Activated Devices (specify number of each)					
3.A. Gates <b>2</b>	3.B. Four-quadrant (or full barrier) Gates <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	3.C. Cantilevered (or Bridged) Flashing Lights: Over Traffic Lane (number) <b>2</b> Not Over Traffic Lane (number) <b>0</b>		3.D. Mast Mounted Flashing Lights (number) <b>2</b>	3.E. Number of Flashing Light Pairs <b>9</b>
3.F. Other Flashing Lights: Number <b>0</b> Specify Type (max. 9 char.) _____		3.G. Highway Traffic Signals (number) <b>0</b>	3.H. Wigwags (number) <b>0</b>	3.I. Bells (number) <b>1</b>	
3.K. Other Train Activated Warning Devices: (specify) (max. 9 char.) _____					
4. Specify Special Warning Device NOT Train Activated (max. 20 char.)			5. Channelization Devices With Gates <input type="checkbox"/> All Approaches <input type="checkbox"/> One Approach <input checked="" type="checkbox"/> None		
6. Train Detection <input checked="" type="checkbox"/> Constant Warning Time <input type="checkbox"/> DC/AFO <input type="checkbox"/> Motion Detectors <input type="checkbox"/> Other <input type="checkbox"/> None		7. Signaling for Train Operation: Is Track Equipped with Train Signals? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		8. Traffic Light Interconnection/Preemption <input type="checkbox"/> Not Interconnected <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Simultaneous Preemption <input type="checkbox"/> Advance Preemption	
9. Reserved For Future Use	10. Reserved For Future Use	11. Reserved For Future Use		12. Reserved For Future Use	
<b>Part IV: Physical Characteristics</b>					
1. Type of Development <input type="checkbox"/> Open Space <input type="checkbox"/> Residential <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional			2. Smallest Crossing Angle <input type="checkbox"/> 0° - 29° <input type="checkbox"/> 30° - 59° <input checked="" type="checkbox"/> 60° - 90°		
3. Number of Traffic Lanes Crossing Railroad <b>2</b>		4. Are Truck Pullout Lanes Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		5. Is Highway Paved? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
6. Crossing Surface (on main line) <input checked="" type="checkbox"/> 1. Timber <input type="checkbox"/> 2. Asphalt <input type="checkbox"/> 3. Asphalt and Flange <input type="checkbox"/> 4. Concrete <input type="checkbox"/> 5. Concrete and Rubber <input type="checkbox"/> 6. Rubber <input type="checkbox"/> 7. Metal <input type="checkbox"/> 8. Unconsolidated <input type="checkbox"/> 9. Other (Specify) _____					
7. Does Track Run Down a Street? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		8. Nearby Intersecting Highway? <input checked="" type="checkbox"/> Less than 75 feet <input type="checkbox"/> 75 to 200 feet <input type="checkbox"/> 200 to 500 feet <input type="checkbox"/> N/A Is it Signalized? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
9. Is Crossing Illuminated? (street lights within approx. 50 feet from nearest rail) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		10. Is Commercial Power Available? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		11. Space Reserved For Future Use	
<b>Part V: Highway Information</b>					
1. Highway System <input type="checkbox"/> Interstate <input checked="" type="checkbox"/> Federal Aid, Not NHS <input type="checkbox"/> Nat. Hwy System (NHS) <input type="checkbox"/> Non Federal Aid		2. Is Crossing on State Highway System? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		3. Functional Classification of Road at Crossing <b>Rural Major Collector</b>	
4. Posted Highway Speed <b>30</b>					
5. Annual Average Daily Traffic (AADT) Year <b>2005</b> AADT <b>2950</b>		6. Estimate Percent Trucks <b>20</b>		7. Average Number of School Buses Over Crossing per School Day	

Paperwork Reduction Act: Public reporting for this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB Control Number. The valid OMB Control Number for this collection is 2130-0017.

# U.S. DOT CROSSING INVENTORY FORM

DEPARTMENT OF TRANSPORTATION  
FEDERAL RAILROAD ADMINISTRATION (FRA)

OMB Control No. 2130-0017  
Expires: 7/31/2006

A. Initiating Agency <input checked="" type="checkbox"/> Railroad <input type="checkbox"/> State	B. Crossing Number (max. 7 char.) <u>292465 R</u>	C. Reason for Update <input checked="" type="checkbox"/> Changes in Existing Data <input type="checkbox"/> New Crossing <input type="checkbox"/> Closed Crossing or Abandoned	D. Effective Date (MM/DD/YYYY) <u>10/31/06</u>
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## Part I: Location and Classification Information

1. Railroad Oper. Co. (code (max. 4 char.) or name) <u>INRD</u>		2. State (2 char.) <u>IL</u>	3. County (max. 20 char.) <u>Crawford</u>
4. Railroad Division or Region (max. 14 char.) <u>Indianapolis</u>	5. Railroad Subdivision or District (max. 14 char.) <u>Main Track</u>	7. RR Milepost (max. 7 char.) (nnnnn.nn) <u>139.54</u>	
8. RR I.D. No. (max. 10 char.) <u>X-139.54</u>	9. Nearest RR Timetable Station (max. 15 char.) (optional) <u>Oblong</u>	10. Parent RR (max. 4 char.) (if applicable)	11. Crossing Owner (RR or Company name) (if applicable)
12. City (max. 16 char.) (check one) <input checked="" type="checkbox"/> In <input type="checkbox"/> Near <u>Oblong</u>		13. Street or Road Name (max. 17 char.) <u>Garfield St.</u>	
14. Highway Type & No. (max. 7 char.) <u>City St.</u>		15. ENS Sign Installed (1-800) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
16. Quiet Zone <input checked="" type="checkbox"/> No <input type="checkbox"/> 24 hr <input type="checkbox"/> Partial <input type="checkbox"/> Unknown		20. Average Passenger Train Count Per Day <u>0</u>	
17. Crossing Type (choose one only) <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Pedestrian		18. Crossing Position <input checked="" type="checkbox"/> At Grade <input type="checkbox"/> RR Under <input type="checkbox"/> RR Over	
19. Type of Passenger Service <input type="checkbox"/> AMTRAK <input type="checkbox"/> AMTRAK & Other <input type="checkbox"/> Other <input checked="" type="checkbox"/> None		25. Lat/Long Source <input type="checkbox"/> Actual <input type="checkbox"/> Estimated	

26. Is There an Adjacent Crossing With a Separate Number?  
☐ Yes ☒ No If Yes, Provide Number \_\_\_\_\_ (7 characters)

27. PRIVATE CROSSING INFORMATION

27.A. Category (check one) <input type="checkbox"/> Recreational <input type="checkbox"/> Farm <input type="checkbox"/> Industrial <input type="checkbox"/> Residential <input type="checkbox"/> Commercial	27.B. Public Access <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	27.C. Signs/Signals <input type="checkbox"/> None <input type="checkbox"/> Signs Specify (max. 15 char.) _____ <input type="checkbox"/> Signals Specify (max. 15 char.) _____
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28.A. Railroad Use (max. 20 char.)	29.A. State Use (max. 20 char.)
28.B. Railroad Use (max. 20 char.)	29.B. State Use (max. 20 char.)
28.C. Railroad Use (max. 20 char.)	29.C. State Use (max. 20 char.)
28.D. Railroad Use (max. 20 char.)	29.D. State Use (max. 20 char.)

30. Narrative (max. 100 char.)

31. Emergency Contact (Telephone No.) <u>1-800-677-1985</u>	32. Railroad Contact (Telephone No.) <u>1-317-616-3479</u>	33. State Contact (Telephone No.)
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## MUST COMPLETE REMAINDER OF FORM FOR PUBLIC VEHICLE CROSSINGS AT GRADE

### Part II: Railroad Information

1. Number of Daily Train Movements			
1.A. Total Trains <u>8</u>	1.B. Total Switching Trains <u>4</u>	1.C. Total Daylight Thru Trains (6 AM to 6 PM) <u>4</u>	1.D. Check if Less Than One Movement Per Day <input type="checkbox"/>
2. Speed of Train at Crossing			
2.A. Maximum Time Table Speed (mph) <u>35</u>			
2.B. Typical Speed Range Over Crossing (mph) from <u>25</u> to <u>35</u>			
3. Type and Number of Tracks Main <u>1</u> Other <u>0</u> If Other, Specify (max. 10 char.) _____			
4. Does Another RR Operate a Separate Track at Crossing? <input type="checkbox"/> Yes If Yes, Specify RR (max. 16 char.) _____ <input checked="" type="checkbox"/> No		5. Does Another RR Operate Over Your Track at Crossing? <input type="checkbox"/> Yes If Yes, Specify RR (max. 16 char.) _____ <input checked="" type="checkbox"/> No	

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PAGE 1 OF 2  
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# U.S. DOT CROSSING INVENTORY FORM

B. Crossing Number (max. 7 char.) <b>292465 R</b>		PAGE 2		D. Effective Date (MM/DD/YYYY) <b>10/31/06</b>	
<b>Part III: Traffic Control Device Information</b>					
1. No Signs or Signals  <input type="checkbox"/> Check if Correct		2. Type of Warning Device at Crossing - Signs (specify number of each)			
		2.A. Crossbucks: <b>2</b>	2.B. Highway Stop Signs (R1-1) <b>0</b>	2.C. RR Advance Warning Signs (W10-1) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	2.D. Hump Crossing Sign (W10-5) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown
2.E. Pavement Markings  <input type="checkbox"/> Stoplines <input type="checkbox"/> RR Xing Symbols <input checked="" type="checkbox"/> None			2.F. Other Signs: (specify MUTCD type) Number <b>0</b> Specify Type (max. 10 char.) _____ Number <b>0</b> Specify Type (max. 10 char.) _____		
3. Type of Warning Device at Crossing - Train Activated Devices (specify number of each)					
3.A. Gates <b>2</b>	3.B. Four-quadrant (or full barrier) Gates <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	3.C. Cantilevered (or Bridged) Flashing Lights: Over Traffic Lane (number) <b>0</b> Not Over Traffic Lane (number) <b>0</b>		3.D. Mast Mounted Flashing Lights (number) <b>2</b>	3.E. Number of Flashing Light Pairs <b>7</b>
3.F. Other Flashing Lights: Number <b>0</b> Specify Type (max. 9 char.) _____		3.G. Highway Traffic Signals (number) <b>0</b>	3.H. Wigwags (number) <b>0</b>	3.J. Bells (number) <b>1</b>	
3.K. Other Train Activated Warning Devices: (specify) (max. 9 char.) _____					
4. Specify Special Warning Device NOT Train Activated (max. 20 char.) _____			5. Channelization Devices With Gates <input type="checkbox"/> All Approaches <input type="checkbox"/> One Approach <input checked="" type="checkbox"/> None		
6. Train Detection <input checked="" type="checkbox"/> Constant Warning Time <input type="checkbox"/> DC/AFO <input type="checkbox"/> Motion Detectors <input type="checkbox"/> Other <input type="checkbox"/> None		7. Signalling for Train Operation: Is Track Equipped with Train Signals? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		8. Traffic Light Interconnection/Preemption <input type="checkbox"/> Not Interconnected <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Simultaneous Preemption <input type="checkbox"/> Advance Preemption	
9. Reserved For Future Use	10. Reserved For Future Use	11. Reserved For Future Use		12. Reserved For Future Use	
<b>Part IV: Physical Characteristics</b>					
1. Type of Development <input type="checkbox"/> Open Space <input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional				2. Smallest Crossing Angle <input type="checkbox"/> 0° - 29° <input type="checkbox"/> 30° - 59° <input checked="" type="checkbox"/> 60° - 90°	
3. Number of Traffic Lanes Crossing Railroad <b>2</b>		4. Are Truck Pullout Lanes Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		5. Is Highway Paved? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
6. Crossing Surface (on main line) <input checked="" type="checkbox"/> 1. Timber <input type="checkbox"/> 2. Asphalt <input type="checkbox"/> 3. Asphalt and Flange <input type="checkbox"/> 4. Concrete <input type="checkbox"/> 5. Concrete and Rubber <input type="checkbox"/> 6. Rubber <input type="checkbox"/> 7. Metal <input type="checkbox"/> 8. Unconsolidated <input type="checkbox"/> 9. Other (Specify) _____					
7. Does Track Run Down a Street? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		8. Nearby Intersecting Highway? <input checked="" type="checkbox"/> Less than 75 feet <input type="checkbox"/> 75 to 200 feet <input type="checkbox"/> 200 to 500 feet <input type="checkbox"/> N/A Is it Signalized? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
9. Is Crossing Illuminated? (street lights within approx. 50 feet from nearest rail) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		10. Is Commercial Power Available? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		11. Space Reserved For Future Use	
<b>Part V: Highway Information</b>					
1. Highway System <input type="checkbox"/> Interstate <input type="checkbox"/> Federal Aid, Not NHS <input type="checkbox"/> Nat. Hwy System (NHS) <input checked="" type="checkbox"/> Non Federal Aid		2. Is Crossing on State Highway System? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		3. Functional Classification of Road at Crossing <b>Rural Local</b>	
4. Posted Highway Speed <b>30</b>					
5. Annual Average Daily Traffic (AADT) Year <b>2005</b> AADT <b>450</b>		6. Estimate Percent Trucks <b>6</b>		7. Average Number of School Buses Over Crossing per School Day <b>0</b>	

Paperwork Reduction Act: Public reporting for this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB Control Number. The valid OMB Control Number for this collection is 2130-0017.

# U.S. DOT CROSSING INVENTORY FORM

DEPARTMENT OF TRANSPORTATION  
FEDERAL RAILROAD ADMINISTRATION (FRA)

OMB Control No. 2130-0017

Expires: 7/31/2006

A. Initiating Agency <input checked="" type="checkbox"/> Railroad <input type="checkbox"/> State	B. Crossing Number (max. 7 char.) <b>292467E</b>	C. Reason for Update <input checked="" type="checkbox"/> Changes in Existing Data <input type="checkbox"/> New Crossing <input type="checkbox"/> Closed Crossing or Abandoned	D. Effective Date (MM/DD/YYYY) <b>10/31/06</b>
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## Part I: Location and Classification Information

1. Railroad Oper. Co. (code (max. 4 char.) or name) <b>INRD</b>		2. State (2 char.) <b>IL</b>	3. County (max. 20 char.) <b>Crawford</b>
4. Railroad Division or Region (max. 14 char.)	5. Railroad Subdivision or District (max. 14 char.) <b>Indianapolis</b>	6. Branch or Line Name (max. 15 char.) <b>Main Track</b>	7. RR Milepost (max. 7 char.) (nnnnn.nn) <b>139.35</b>
8. RR I.D. No. (max. 10 char.) <b>X-139.35</b>	9. Nearest RR Timetable Station (max. 15 char.) (optional) <b>Oblong</b>	10. Parent RR (max. 4 char.) (if applicable)	11. Crossing Owner (RR or Company name) (if applicable)
12. City (max. 16 char.) (check one) <input checked="" type="checkbox"/> In <input type="checkbox"/> Near <b>Oblong</b>		13. Street or Road Name (max. 17 char.) <b>Taylor St.</b>	STATE SUPPLIED INFORMATION
14. Highway Type & No. (max. 7 char.)		15. ENS Sign Installed (1-800) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	21. HSR Corridor ID (2 char.)
		16. Quiet Zone <input checked="" type="checkbox"/> No <input type="checkbox"/> 24 hr <input type="checkbox"/> Partial <input type="checkbox"/> Unknown	22. County Map Ref. No. (max. 10 char.)
17. Crossing Type (choose one only) <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Pedestrian	18. Crossing Position <input checked="" type="checkbox"/> At Grade <input type="checkbox"/> RR Under <input type="checkbox"/> RR Over	19. Type of Passenger Service <input type="checkbox"/> AMTRAK <input type="checkbox"/> AMTRAK & Other <input type="checkbox"/> Other <input checked="" type="checkbox"/> None	23. Latitude (max. 10 char., nn.nnnnnn)
20. Average Passenger Train Count Per Day			24. Longitude (max. 11 char., nnn.nnnnnn)
			25. Lat/Long Source <input type="checkbox"/> Actual <input type="checkbox"/> Estimated
26. Is There an Adjacent Crossing With a Separate Number? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Provide Number _____ (7 characters)			

## 27. PRIVATE CROSSING INFORMATION

27.A. Category (check one) <input type="checkbox"/> Recreational <input type="checkbox"/> Farm <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial		27.B. Public Access <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	27.C. Signs/Signals <input type="checkbox"/> None <input type="checkbox"/> Signs Specify (max. 15 char.) _____ <input type="checkbox"/> Signals Specify (max. 15 char.) _____
28.A. Railroad Use (max. 20 char.)		29.A. State Use (max. 20 char.)	
28.B. Railroad Use (max. 20 char.)		29.B. State Use (max. 20 char.)	
28.C. Railroad Use (max. 20 char.)		29.C. State Use (max. 20 char.)	
28.D. Railroad Use (max. 20 char.)		29.D. State Use (max. 20 char.)	
30. Narrative (max. 100 char.)			

31. Emergency Contact (Telephone No.) <b>1-800-677-1985</b>	32. Railroad Contact (Telephone No.) <b>1-317-616-3479</b>	33. State Contact (Telephone No.)
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## MUST COMPLETE REMAINDER OF FORM FOR PUBLIC VEHICLE CROSSINGS AT GRADE

### Part II: Railroad Information

1. Number of Daily Train Movements			
1.A. Total Trains <b>8</b>	1.B. Total Switching Trains <b>4</b>	1.C. Total Daylight Thru Trains (6 AM to 6 PM) <b>4</b>	1.D. Check if Less Than One Movement Per Day <input type="checkbox"/>
2. Speed of Train at Crossing			
2.A. Maximum Time Table Speed (mph) <b>35</b>			
2.B. Typical Speed Range Over Crossing (mph) from <b>25</b> to <b>35</b>			
3. Type and Number of Tracks Main <b>1</b> Other <b>0</b> If Other, Specify (max. 10 char.) _____			
4. Does Another RR Operate a Separate Track at Crossing? <input type="checkbox"/> Yes If Yes, Specify RR (max. 16 char.) <input checked="" type="checkbox"/> No		5. Does Another RR Operate Over Your Track at Crossing? <input type="checkbox"/> Yes If Yes, Specify RR (max. 16 char.) <input checked="" type="checkbox"/> No	

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# U.S. DOT CROSSING INVENTORY FORM

B. Crossing Number (max. 7 char.) <b>292467 E</b>		PAGE 2		D. Effective Date (MM/DD/YYYY) <b>10/31/06</b>	
<b>Part III: Traffic Control Device Information</b>					
1. No Signs or Signals <input type="checkbox"/> Check if Correct		2. Type of Warning Device at Crossing - Signs (specify number of each)			
		2.A. Crossbucks: <b>2</b>	2.B. Highway Stop Signs (R1-1) <b>0</b>	2.C. RR Advance Warning Signs (W10-1) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	2.D. Hump Crossing Sign (W10-5) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown
2.E. Pavement Markings <input type="checkbox"/> Stoplines <input type="checkbox"/> RR Xing Symbols <input checked="" type="checkbox"/> None			2.F. Other Signs: (specify MUTCD type) Number _____ Specify Type (max. 10 char.) _____ Number _____ Specify Type (max. 10 char.) _____		
3. Type of Warning Device at Crossing - Train Activated Devices (specify number of each)					
3.A. Gates <b>2</b>	3.B. Four-quadrant (or full barrier) Gates <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	3.C. Cantilevered (or Bridged) Flashing Lights: Over Traffic Lane (number) <b>0</b> Not Over Traffic Lane (number) <b>0</b>		3.D. Mast Mounted Flashing Lights (number) <b>2</b>	3.E. Number of Flashing Light Pairs <b>4</b>
3.F. Other Flashing Lights: Number <b>0</b> Specify Type (max. 9 char.) _____		3.G. Highway Traffic Signals (number) <b>0</b>		3.H. Wigwags (number) <b>0</b>	3.J. Bells (number) <b>1</b>
3.K. Other Train Activated Warning Devices: (specify) (max. 9 char.) _____					
4. Specify Special Warning Device NOT Train Activated (max. 20 char.)			5. Channelization Devices With Gates <input type="checkbox"/> All Approaches <input type="checkbox"/> One Approach <input checked="" type="checkbox"/> None		
6. Train Detection <input checked="" type="checkbox"/> Constant Warning Time <input type="checkbox"/> DC/AFD <input type="checkbox"/> Motion Detectors <input type="checkbox"/> Other <input type="checkbox"/> None		7. Signalling for Train Operation: Is Track Equipped with Train Signals? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		8. Traffic Light Interconnection/Preemption <input type="checkbox"/> Not Interconnected <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Simultaneous Preemption <input type="checkbox"/> Advance Preemption	
9. Reserved For Future Use		10. Reserved For Future Use		11. Reserved For Future Use	
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3. Number of Traffic Lanes Crossing Railroad <b>1</b>		4. Are Truck Pullout Lanes Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		5. Is Highway Paved? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
6. Crossing Surface (on main line) <input type="checkbox"/> 1. Timber <input checked="" type="checkbox"/> 2. Asphalt <input type="checkbox"/> 3. Asphalt and Flange <input type="checkbox"/> 4. Concrete <input type="checkbox"/> 5. Concrete and Rubber <input type="checkbox"/> 6. Rubber <input type="checkbox"/> 7. Metal <input type="checkbox"/> 8. Unconsolidated <input type="checkbox"/> 9. Other (Specify) _____					
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<b>Part V: Highway Information</b>					
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4. Posted Highway Speed <b>30</b>					
5. Annual Average Daily Traffic (AADT) Year <b>2005</b> AADT <b>200</b>		6. Estimate Percent Trucks <b>15</b>		7. Average Number of School Buses Over Crossing per School Day <b>0</b>	

Paperwork Reduction Act: Public reporting for this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB Control Number. The valid OMB Control Number for this collection is 2130-0017.